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### **FEC FORM 2**

#### STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)					
	Ms. Martha E. McSally		الماماد الأحمامات		J	2. Condidate's FFC Identification Number
	(b) Address (number and street) PO Box 19128	ЦС	theck if addre	ess cnange	1	Candidate's FEC Identification Number     H2AZ08102
	(c) City, State, and ZIP Code					3. Is This New Amended
	Tucson		A.	Z 857	31-9128	Statement (N) OR X (A)
4.	Party Affiliation	5. Office Soug	ght			trict of Candidate
	REPUBLICAN PARTY	House			AZ	02
	DE	SIGNATIO	N OF PR	RINCIPA	_ CAMPAIGI	N COMMITTEE
7.	I hereby designate the following nar	ned political co	mmittee as r	my Principa	Campaign Com	mittee for the $\frac{2016}{\text{(year of election)}}$ election(s).
	NOTE: This designation should be f	iled with the ap	propriate off	ice listed in	the instructions.	
	(a) Name of Committee (in full)  McSally for Congres	ss				
	(b) Address (number and street) PO Box 19128					
	(c) City, State, and ZIP Code					
	Tucson				AZ	85731-9128
	DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)					
8.	I hereby authorize the following nan candidacy.	ned committee	, which is NC	T my princi	pal campaign cor	mmittee, to receive and expend funds on behalf of my
	NOTE: This designation should be f	iled with the pr	incipal camp	aign commi	ttee.	
	(a) Name of Committee (in full)  McSally Tobin Victo	ry Comm	ittee			
	Wesally Tobili Victo	ry Commi	illee			
	(b) Address (number and street) 228 S Washington Street					
	Suite 115					
	(c) City, State, and ZIP Code					
	Alexandria				VA	22314-5404
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.						
Si	gnature of Candidate					Date
М	s. Martha E. McSally			[Ele	ctronically Filed]	09/21/2015
NC	OTE: Submission of false, erroneous	or incomplete	information ı	may subjec	the person signi	ng this Statement to penalties of 2 U.S.C. §437g.

FEC FORM 2 (REV. 02/2009)

FEC Form 2 (Rev. 02/2003)		Page 2 / 9
	OTHER AUTHORIZED COMMITTEES ng Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is NOT candidacy.	my principal campaign committee, to receive and expend funds or	behalf of my
NOTE: This designation should be filed with the principal	al campaign committee.	
(a) Name of Committee (in full)		
Winning Women		
(b) Address (number and street) 228 S Washington Street Suite 115		
(c) City, State and ZIP Code		
Alexandria	VA 22314-5404	
	FOTHER AUTHORIZED COMMITTEES ing Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is NOT candidacy.	my principal campaign committee, to receive and expend funds or	n behalf of my
NOTE: This designation should be filed with the princip	oal campaign committee.	
(a) Name of Committee (in full)		
McSally Tobin Rogers Ducey Vict	ory Commitee	
(b) Address (number and street) 2532 N 4th Street		
Suite 528 (c) City, State and ZIP Code		
Flagstaff	AZ 86004-3712	
	OTHER AUTHORIZED COMMITTEES ing Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is NOT candidacy.	my principal campaign committee, to receive and expend funds or	n behalf of my
NOTE:This designation should be filed with the princip	oal campaign committee.	
(a) Name of Committee (in full)		
Young Guns Day 1 2014		
(b) Address (number and street) 228 S Washington Street Suite 115		
(c) City, State and ZIP Code		
Alexandria	VA 22314-5404	

FEC Form 2 (Rev. 02/2003)		Page 3 / 9
	OF OTHER AUTHORIZED COMMITTEES uding Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is NC candidacy.	DT my principal campaign committee, to receive and expend funds on	behalf of my
NOTE:This designation should be filed with the prince	cipal campaign committee.	
(a) Name of Committee (in full)		_
Friends of Winning Women		
(b) Address (number and street) 228 S Washington Street Suite 115		
(c) City, State and ZIP Code	VA 20244 5404	
Alexandria	VA 22314-5404	
	OF OTHER AUTHORIZED COMMITTEES uding Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is NC candidacy.	OT my principal campaign committee, to receive and expend funds on	behalf of my
NOTE: This designation should be filed with the prince	cipal campaign committee.	
(a) Name of Committee (in full)		
American Fund		
(b) Address (number and street) 1512 Neal Street NE		
(c) City, State and ZIP Code		_
Washington	DC 20002-3918	
	OF OTHER AUTHORIZED COMMITTEES uding Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is NO candidacy.	OT my principal campaign committee, to receive and expend funds on	behalf of my
NOTE:This designation should be filed with the prince	cipal campaign committee.	
(a) Name of Committee (in full)		
Republicans Inspiring Success 8	& Empowerment Project	
(b) Address (number and street) PO Box 2485		
(c) City, State and ZIP Code		
Springfield	VA 22152-0485	

FEC Form 2 (Rev. 02/2003)		Page 4 / 9
DESIGN	IATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee candidacy.	e, which is NOT my principal campaign committee, to receive and expend fun	ds on behalf of my
NOTE:This designation should be filed w	vith the principal campaign committee.	
(a) Name of Committee (in full)		
Arizona Congressional \	Victory Fund	
(b) Address (number and street) PO Box 9861		
(c) City, State and ZIP Code		_
Arlington	VA 22219-1861	
DESIGN	NATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee candidacy.	e, which is NOT my principal campaign committee, to receive and expend fun	ds on behalf of my
NOTE: This designation should be filed w	with the principal campaign committee.	
(a) Name of Committee (in full)		
Winning Women		
(b) Address (number and street) 228 S Washington Street Suite 115		
(c) City, State and ZIP Code		
Alexandria	VA 22314-5404	
DESIGN	IATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee candidacy.	e, which is NOT my principal campaign committee, to receive and expend fun	ds on behalf of my
NOTE: This designation should be filed w	with the principal campaign committee.	
(a) Name of Committee (in full)		
McSally Tobin Rogers D	Oucey Victory Commitee	
(b) Address (number and street) 2532 N 4th Street Suite 528		
(c) City, State and ZIP Code		
Flagstaff	AZ 86004-3712	

Alexandria

#### FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003) [ ADDITIONAL ] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) Young Guns Day 1 2014 (b) Address (number and street) 228 S Washington Street Suite 115 (c) City, State and ZIP Code Alexandria VA 22314-5404 [ADDITIONAL] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) American Fund (b) Address (number and street) 1512 Neal Street NE (c) City, State and ZIP Code Washington DC 20002-3918 [ADDITIONAL] **DESIGNATION OF OTHER AUTHORIZED COMMITTEES** (Including Joint Fundraising Representatives) I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) Friends of Winning Women (b) Address (number and street) 228 S Washington Street Suite 115 (c) City, State and ZIP Code

VA

22314-5404

FEC Form 2 (Rev. 02/2003)				Page 6 / 9
	ON OF OTHER AUTH	_	_	[ ADDITIONAL ]
I hereby authorize the following named committee, which candidacy.	h is NOT my principal campaigr	n committee, to r	eceive and expend funds o	n behalf of my
NOTE: This designation should be filed with the	e principal campaign commi	ittee.		
(a) Name of Committee (in full)				
Arizona Congressional Victo	ory Fund			
(b) Address (number and street) PO Box 9861				
(c) City, State and ZIP Code				
Arlington		VA	22219-1861	
DESIGNATIO	ON OF OTHER AUTH (Including Joint Fundraisin			[ ADDITIONAL ]
I hereby authorize the following named committee, which candidacy.	h is NOT my principal campaigi	n committee, to	eceive and expend funds o	on behalf of my
NOTE: This designation should be filed with the	e principal campaign comm	ittee.		
(a) Name of Committee (in full)				
WINNING WOMEN 2016				
(b) Address (number and street) 228 S WASHINGTON ST STE 115				
(c) City, State and ZIP Code				
ALEXANDRIA		VA	22314	
DESIGNATIO	ON OF OTHER AUTH			[ ADDITIONAL ]
I hereby authorize the following named committee, which candidacy.	h is NOT my principal campaig	n committee, to	eceive and expend funds o	on behalf of my
NOTE: This designation should be filed with the	e principal campaign comm	ittee.		
(a) Name of Committee (in full)				
PATRIOT DAY I 2015				
(b) Address (number and street) 228 S WASHINGTON ST STE 115				
(c) City, State and ZIP Code				
AL EVANDDIA		١/٨	22214	

FEC Form 2 (Rev. 02/2003)		Page 7 / 9
DESIGNATIO	ON OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which candidacy.	ch is NOT my principal campaign committee, to receive and expend funds	on behalf of my
NOTE:This designation should be filed with the	e principal campaign committee.	
(a) Name of Committee (in full)		
Winning Women		
(b) Address (number and street) 228 S Washington Street Suite 115		
(c) City, State and ZIP Code Alexandria	VA 22314-5404	
Alexanuna	VA 22314-3404	
DESIGNATIO	ON OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which candidacy.	ch is NOT my principal campaign committee, to receive and expend funds	on behalf of my
NOTE:This designation should be filed with the	e principal campaign committee.	
(a) Name of Committee (in full)		
McSally Tobin Rogers Duce	y Victory Commitee	
(b) Address (number and street) 2532 N 4th Street Suite 528		
(c) City, State and ZIP Code		_
Flagstaff	AZ 86004-3712	
DESIGNATIO	ON OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which candidacy.	ch is NOT my principal campaign committee, to receive and expend funds	on behalf of my
NOTE: This designation should be filed with the	e principal campaign committee.	
(a) Name of Committee (in full)		_
Young Guns Day 1 2014		
(b) Address (number and street) 228 S Washington Street Suite 115		
(c) City, State and ZIP Code		
Alexandria	VA 22314-5404	

FEC Form 2 (Rev. 02/2003)		Page 8 / 9
	OF OTHER AUTHORIZED COMMITTEES cluding Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is candidacy.	NOT my principal campaign committee, to receive and expend funds of	on behalf of my
NOTE: This designation should be filed with the pr	rincipal campaign committee.	
(a) Name of Committee (in full)		
American Fund		
(b) Address (number and street) 1512 Neal Street NE		
(c) City, State and ZIP Code		
Washington	DC 20002-3918	
	I OF OTHER AUTHORIZED COMMITTEES accluding Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is candidacy.	NOT my principal campaign committee, to receive and expend funds	on behalf of my
NOTE:This designation should be filed with the pr	rincipal campaign committee.	
(a) Name of Committee (in full)		
Friends of Winning Women		
(b) Address (number and street) 228 S Washington Street Suite 115		
(c) City, State and ZIP Code		
Alexandria	VA 22314-5404	
	OF OTHER AUTHORIZED COMMITTEES acluding Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is candidacy.	NOT my principal campaign committee, to receive and expend funds	on behalf of my
NOTE:This designation should be filed with the pr	rincipal campaign committee.	
(a) Name of Committee (in full)		
Arizona Congressional Victory	Fund	
(b) Address (number and street) PO Box 9861		
(c) City, State and ZIP Code		
Arlington	VA 22219-1861	

FEC Form 2 (Rev. 02/2003)		Page 9 /
DESIGNATI	ION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, whi candidacy.	ich is NOT my principal campaign committee, to receive and expend funds on be	half of my
NOTE:This designation should be filed with the	he principal campaign committee.	
(a) Name of Committee (in full) WINNING WOMEN 2016		
(b) Address (number and street) 228 S WASHINGTON ST STE 115		
(c) City, State and ZIP Code		
ALEXANDRIA	VA 22314	
DESIGNAT	TION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, whi candidacy.	ich is NOT my principal campaign committee, to receive and expend funds on be	half of my
NOTE:This designation should be filed with the	the principal campaign committee.	
(a) Name of Committee (in full)		
PATRIOT DAY I 2015		
(b) Address (number and street) 228 S WASHINGTON ST STE 115		
(c) City, State and ZIP Code		
ALEXANDRIA	VA 22314	
DESIGNAT	ION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, whi candidacy.	iich is NOT my principal campaign committee, to receive and expend funds on be	half of my
NOTE:This designation should be filed with the	the principal campaign committee.	
(a) Name of Committee (in full)		
(b) Address (number and street)		
(c) City, State and ZIP Code		